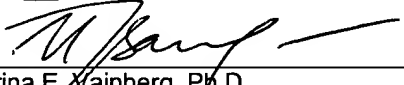




AMENDMENT TRANSMITTAL LETTER				Docket No. 04040/1200990-US5	
Application No. 09/375,514-Conf. #5198	Filing Date August 17, 1999	Examiner K. A. Lacourciere	Art Unit 1635		
Applicant(s): John C. Reed					
Invention: ANTI-SENSE OLIGONUCLEOTIDES FOR INHIBITING THE GROWTH OF LYMPHOMA AND LEUKEMIA CELLS					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	34	- 48 =	0	x 9.00	0.00
Independent Claims	3	- 3 =	0	x 43.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					55.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>55.00</b>
<input type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input checked="" type="checkbox"/> Small Entity</span>					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> A check in the amount of \$ 55.00 to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 _____ Irina E. Wainberg, Ph.D. Attorney Reg. No.: 48,008				Dated: June 14, 2004	
DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7770					
Express Mail Label No. _____ Dated: _____					



Application No. (if known): 09/375,514

Attorney Docket No.: 04040/1200990-US5

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. \_\_\_\_\_ in an envelope addressed to:

**418267362 - US**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on June 14, 2004  
Date

Signature

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page);  
Check No. 5259 in the amount of \$55.00;  
One Month Request for Extension of Time Under 37 CFR 1.136(a) (2 pages);  
Amendment Transmittal (1 page);  
Supplemental Amendment under 37 C.F.R. 1.111 (5 pages); and  
Return Receipt Postcard.

